

Patient Participation Group (PPG) of Watership Down Health (WDH)

Minutes of the WDH PPG Meeting held from 5pm to 6.30pm on
Monday 26th February 2024, by teleconference

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| Susie Altmeyer-Ennis | Business Manager of Watership Down | “SAE” |
| Sarah Arnold | Practice Manager of Watership Down | “SA” |
| Abigail Compton-Burnett | Patient Representative, based in Oakley | “ACB” |
| Lucy Richards | Patient Representative, based in Kingsclere | “LR” |
| Nicky Tufnell | Patient Representative, based in Kingsclere | “NT” |
| Dr Nicola Decker | GP Partner | “ND” |
| Steve Erskine | Chair, Hampshire Hospitals NHS Foundation Trust | “SE” |

Apologies

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| Brian Elkins | Patient Representative, based in Overton | “BE” |
| Lisette Kay | Patient Representative, based in Oakley | “LK” |
| Ian Pryce | Patient Representative, based in Oakley | “IP” |

1 Actions from the last meeting

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| Provide notes regarding medications supply for March newsletter | CC – see agenda item 9 |
| Ask the PPG to help with patient engagement with specific topics | WDH team - ongoing |
| Ask CGHB PPG about its virtual PPG, newsletter, website, etc | ACB - completed |
| Discuss Solutions 4 Health with WDH partners | SAE – see agenda item 5 |
| Send final version of newsletters to all PPG Committee members | BE - ongoing |
| Post/send newsletters to media channels | PPG Committee - ongoing |
| Provide notes re Andover Mind Peer Support Worker for March newsletter | SAE - completed |
| Send map showing WDH practice boundary to IP and ACB | SAE – completed |
| Ask ICB when it will finish developing its strategy for delivering primary care services to residents in North Hampshire | ACB – see agenda item 10 |

2 Minutes of the last meeting

Agreed

3 Practice update

- Staff team. The staff team is stable and their photos have been updated on the website. WDH has recently introduced a new post; data and administration.
- Birthday cards for older patients. Named GPs have started sending birthday cards to their patients on their 75th birthday. The GPs include information about services that might be useful, with the aim of encouraging these patients to become involved in a health plan, thereby helping them to adopt a more proactive, rather than reactive, approach to their health.

- WDH has secured funding for the printing and postage of these cards for a year. WDH will then review the effectiveness of the initiative.
- Patient access. Many patients are frustrated that the appointment options are an urgent appointment on the same day and a non-urgent appointment in 3 weeks. They recognise that their need to see a clinician is not urgent, but 3 weeks feels like a very long time to wait to talk to a clinician about something that concerns them. WDH is reviewing appointment data over the past 10 months, in order to identify exploring ways to provide “soon” appointments, between urgent same day and 3 week appointment.
- Breast screening. All female patients over 50 have been invited for a breast screening appointment before the end of May.

4 MMR Catch Up campaign

The nursing team has held several additional MMR clinics, which have been well attended.

5 Smoke Free Hampshire service

WDH has emailed all patients who smoke to invite them to a smoke-free Hampshire appointment. The HCC van visits the surgeries every week and take-up of appointments has been good.

6 Abdominal Aortic Aneurysm (AAA) screening service

WDH is part of the national AAA screening programme, which involves screening men during the year they turn 65. This service is working well.

7 Trial of Overton Health Kiosk

The kiosk will first be installed in Overton, because that surgery has the highest footfall. The kiosk will measure blood pressure, height and weight and will enable the practice team to identify patients who would benefit from support programmes.

8 Changes to gluten free prescribing initiated by the ICB

The NHS will no longer subsidise basic gluten-free ingredients, such as bread, flour and pasta, for most people with celiac disease. Some patients will receive subsidies in exceptional circumstances, eg where they are struggling with the cost of living. The decision has been taken due to the general decrease in the price of gluten-free food.

9 Local pharmacy services

There appears to be a reduction in the problems associated with medication supply. WDH PPG will, therefore, only include medication supply issues in the PPG newsletter if the ICB has drafted communications for local practices to disseminate.

Action: SAE to check whether the ICB has drafted information regarding medication supply.

10 The Chair’s role at HHFT and the system level transformation programme

SE provided a brief overview of his career prior to becoming Chair of HHFT. He identified some of the key issues faced by HHFT, including:

- Emergency care: currently at HHFT, only 60% of patients meet the national target for a maximum 4 hour wait between attending ED and a decision being made about their

onwards care or discharge. Sadly, this low percentage is increasingly becoming the norm. HHFT works hard to minimise ambulance waits by increasing capacity in ED and, hopefully, establishing an Urgent Treatment Centre (UTC) beside ED (using a similar model to that in Holland).

- Patients with no criteria to reside: There were 165 patients with No Criteria to Reside (NCR) at HHFT on 25th February. The Chief Operating Officer (COO) is working with the other parts of the ICS to reduce the number of NCR patients at HHFT, particularly to address the needs of patients requiring complex care packages at home.
- Waiting lists: HHFT has implemented a number of initiatives to reduce the waiting lists, eg maintaining elective care throughout the winter and improving the utilisation of operating theatres. HHFT uses private sector facilities as part of its programme to reduce the waiting lists, because it receives additional funding if it reduces waiting lists.
- Financial deficit of the ICB. NHSE has placed the Hampshire and Isle of Wight Integrated Care Board (HIOW ICB) and all seven of its member trusts into a recovery support programme, after it forecast a total system deficit for 2023/24 of £118 million. Several other ICBs are now forecasting deficits. HHFT expects to have a deficit of £27m for this financial year. It plans to be at break even rate by October 2024.
- The hospital estate: The poor condition of the hospital estate incurs significant extra costs and impacts the care that staff are able to provide for patients.
- Junior doctors' strike. HHFT has tried to minimise the effects of the recent doctors' strikes, but there has been some impact on patient care and staff costs.

Waiting time information. It was suggested that primary care teams and patients would benefit from greater understanding of the length of waiting times for specific departments, so they could plan care until treatment. 12,000 of WDH's 19,000 patients have on-line accounts, so it might be possible to provide waiting information on the NHS app. Action: SE to discuss how to increase the information regarding waiting times with the HHFT team, particularly from the referral being sent by the GP to the first appointment at HHFT.

Faster workflow at the hospital is impacting GP workload, particularly for patients who are referred on the 2 week cancer pathway. It is frustrating that GPs can only see diagnostic test results after an HHFT multi-disciplinary meeting.

Greater patient access to medical records is resulting in more phone calls to WDH from patients who are seeing and trying to interpret their test results for themselves.

The ICB's transformation programmes focus on urgent care, primary and local care, patient discharge, elective care and the workforce. SE observed that, in his view, community care and discharge were the most important and urgent programmes.

ND said that primary and secondary care staff needed to recognise that patients are not "my patients" or "your patients", but "our patients". It was important to determine how best to work together as a team, for example by having clear guidelines that the clinician who ordered a test should also be responsible for telling the patient the results of that test.

SAE noted that the number of under 1s attending ED has increased significantly as community support for that age group has decreased, eg Sure Start, school nurses, health visitors.

SAE also noted that some care homes and care services are closing down, making it difficult to support patients being discharged.

11 New hospital consultation

The new hospital programme consultation is over halfway through. A variety of approaches, including telephone surveys, have been used to contact communities that are harder to reach. He asked PPG members to encourage local residents to take part in the consultation.

12 Feedback on Camrose Gillies Hackwood Beggarwood (CGHB) PPG

- CGHB PPG has held sessions to teach patients how to download and use the NHS app. SAE reported that most WDH patients who want to use on-line services are already using those services. SAE contacts patients who don't use on-line services two times per year to invite them to use those services.
- CGHB PPG has also established a PPG website, on which there is a lot of information about local groups and services. They also produce a regular newsletter.
- CGHB PPG holds in person PPG Committee meetings and then virtual PPG meetings. The PPG has also held in person PPG meetings about specific topics, eg on-line services, ideas for improving health services.

13 PPG projects

Recruitment. The PPG will include an invitation for patients to join the PPG in the next newsletter. PPG members are encouraged to attend local community groups, in order to invite people to join the PPG.

ACB will meet Elizabeth Allison, Rural West PCN Manager, in order to understand more about how the PCN works and ways in which our PPG could support it.

14 Newsletters

It was suggested that the next newsletter could include information about the new Health Kiosk and Andover Minor Injuries Clinic.

15 North Hampshire PPG (NH PPG)

NH PPG is reviewing its role, with a view to greater collaboration between PPGs on issues such as communication and signposting.

16 Any other business

17 Next meeting

22nd April and 24th June (AGM)